## **DECLARATION FOR** Attorney Docket No. 02-CT-418/DP **UTILITY OR DESIGN First Named Inventor Giuseppe AVELLONE** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** OR □ Declaration Declaration **Filing Date** November 18, 2003 Submitted Submitted after Initial Filing--surcharge 37 CFR with Initial **Group Art Unit** Filing 1.16(e) required **Examiner Name**

As a below named Inventor	, I hereby declare that:			·	
My residence, mailing address, and citizenship are as stated below next to my name.					
I believe I am the original, fi inventor (if plural names are the invention entitled:					
METHOD AND DEVICE FOR SYNCHRONIZATION AND IDENTIFICATION OF THE CODEGROUP IN CELLULAR COMMUNICATION SYSTEMS AND COMPUTER PROGRAM PRODUCT THEREFOR					
the specification of which		,			
is attached hereto					
OR					
was filed on (MM/DD/YYYY)		as U.S. Application			
and was amended on (MM/DD/YYYY)		(if applicable)			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C § 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Appl. No.(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop Yes	by Attached? No
TO2002 A 001082	IT	12/13/2002		$\boxtimes$	
Additional foreign application nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.					
Application Number(s)	Filing Date (MM/DD/Y)	<b>^</b> Y)			

## **DECLARATION – Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s) or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application U.S. Parent Application or PCT Parent No. **Parent Filing Date** Parent Patent No. (MM/DD/YY) (if applicable) Additional U.S. or PCT international application nos. listed on PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith: □ Customer Number 25235 OR Registered practitioner(s) name/registration number listed below Registration Registration Number Number Name Name Additional registered practitioner(s) named on supplemental sheet PTO/SB/02C attached hereto. OR 

Correspondence 25235 Direct all correspondence to: 

Customer Number address below Name **Address** City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and such willful false statements may jeopardize the validity of the application or any patent issued thereon. ☐ A petition has been filed for this unsigned inventor. Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname **AVELLONE** Giuseppe Inventor's Date Signature Residence City State Country Citizenship IT **Palermo** IT Mailing Address Via Paisiello, 31 State ZIP I-90145 Country IT **Palermo** ☑Additional inventors are named on 2 supplemental additional inventor(s) sheet(s) PTO/SB/02A attached

## ADDITIONAL INVENTOR(S) DECLARATION **Supplemental Sheet** Page \_\_1\_\_ of \_\_2\_ Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Francesco RIMI Inventor's Date Signature State Country Citizenship Residence: City Alcamo (Trapani) IT IT Via Mirrione, 17 Post Office Address Post Office Address ZIP City State I-91011 Country IT Alcamo (Trapani) Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle [if any]) **PAPPALARDO** Francesco Inventor's Signature Date State Country IT Citizenship IT Palermo (Catania) Residence: City Post Office Address Via Madonna della Scala, 10/A Post Office Address City State ZIP 1-95047 Country IT Palermo (Catania) Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname **GALLUZZO Agostino** Inventor's Signature Date Country Citizenship State IT Palma di Montechiaro IT (Agrigento) Residence: City Piazza Borsellino, 14 Post Office Address Post Office Address City ZIP Country State IT Palma di Montechiaro 1-92020 (Agrigento)

## **ADDITIONAL INVENTOR(S)** DECLARATION **Supplemental Sheet** Page \_\_2\_ of \_\_2\_ Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname **VISALLI** Giuseppe Inventor's Date Signature Messina State Country IT Citizenship IT Residence: City Via delle Mura, 44 Post Office Address Post Office Address ZIP City Messina State I-98121 Country IT Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City Post Office Address Post Office Address City State ZIP Country Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City Post Office Address Post Office Address City ZIP Country State